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APPLICANTS

Kevin Groid, Del Mar, CA;  
 Adrian Pelkus, San Marcos, CA;  
 Michael P. Eddy, Del Mar, CA;

\*\* CONTINUING DATA \*\*\*\*\*  
*EB* *9/7/05*

\*\* FOREIGN APPLICATIONS \*\*\*\*\*  
*EB*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED \*\* SMALL ENTITY \*\*  
 \*\* 05/13/2004

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged <i>[Signature]</i> <i>EB</i> Examiner's Signature Initials	STATE OR COUNTRY CA	SHEETS DRAWING 4	TOTAL CLAIMS 46	INDEPENDENT CLAIMS 2
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ADDRESS  
 37101  
 LAW OFFICE OF MICHAEL P. EDDY  
 12526 HIGH BLUFF DRIVE, STE. 300  
 SAN DIEGO , CA  
 92130

TITLE  
 BODY FORCE ALARMING APPARATUS AND METHOD

FILING FEE  RECEIVED 619	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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